

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

ADDRESS (number and street) ▼

6363 OAK TREE BLVD

☐ Check if different than previously reported. (ACC)

INDEPENDENCE

OH

44131

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00082271

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
03 01 2015

through

M M M / D D D / Y Y Y Y Y Y  
03 31 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms Christen Carmigiano

Signature of Treasurer

Ms Christen Carmigiano

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
04 16 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
03 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2015</span>		12570.69
(b) Cash on Hand at Beginning of Reporting Period.....	29081.54	
(c) Total Receipts (from Line 19) .....	13609.15	31449.15
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	42690.69	44019.84
7. Total Disbursements (from Line 31) .....	-607.38	721.77
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	43298.07	43298.07
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

10850.00

27950.00

(ii) Unitemized .....

2500.00

3100.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

13350.00

31050.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

13350.00

31050.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

259.15

399.15

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

13609.15

31449.15

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

13609.15

31449.15

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	392.62	721.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	392.62	721.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-1000.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	-607.38	721.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-607.38	721.77

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	13350.00	31050.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13350.00	31050.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	392.62	721.77
37. Offsets to Operating Expenditures (from Line 15, page 3).....	259.15	399.15
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	133.47	322.62

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 13  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)**

<p>Full Name (Last, First, Middle Initial) <b>A. Mr. James Barrett Jr.</b></p> <p>Mailing Address 317 Deerwood Ln.</p> <p>City State Zip Code Brentwood TN 37027-4864</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Link Systems Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 03 / 02 / 2015</p> <p><b>Transaction ID : SA11AI.7800</b></p> <p>Amount of Each Receipt this Period 500.00</p> <p>Itemized contribution</p>		
<p>Full Name (Last, First, Middle Initial) <b>B. Mr. Jeffrey Clark</b></p> <p>Mailing Address 11014 N. Kensington Dr.</p> <p>City State Zip Code Mequon WI 53097-3480</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Waukesha Metal Products Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2015</p> <p><b>Transaction ID : SA11AI.7814</b></p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Itemized contribution</p>		
<p>Full Name (Last, First, Middle Initial) <b>C. Mr. Lance Green</b></p> <p>Mailing Address 23124 Pocket Rd.</p> <p>City State Zip Code Batesville IN 47006</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Batesville Tool &amp; Die Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 03 / 02 / 2015</p> <p><b>Transaction ID : SA11AI.7801</b></p> <p>Amount of Each Receipt this Period 300.00</p> <p>Itemized contribution</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>1800.00</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)**

Full Name (Last, First, Middle Initial)

**A. Mr. Lance Green**

Mailing Address 23124 Pocket Rd.

City

Batesville

State

IN

Zip Code

47006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Batesville Tool & Die

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

03 / 09 / 2015

**Transaction ID : SA11AI.7840**

Amount of Each Receipt this Period

100.00

Itemized contribution

Full Name (Last, First, Middle Initial)

**B. Mr. Douglas Johnson**

Mailing Address 1267 Peck Ln.

City

Cheshire

State

CT

Zip Code

06410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Marion Manufacturing Co.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 09 / 2015

**Transaction ID : SA11AI.7850**

Amount of Each Receipt this Period

100.00

Itemized contribution

Full Name (Last, First, Middle Initial)

**C. Mr. Daniel P. McGregor**

Mailing Address 1530 Woodedge Rd.

City

Springfield

State

OH

Zip Code

45504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

McGregor Metalworking

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

03 / 30 / 2015

**Transaction ID : SA11AI.7858**

Amount of Each Receipt this Period

1000.00

Itemized contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)**

Full Name (Last, First, Middle Initial)

**A. Mr. Ross McGregor**

Mailing Address 2915 Burrwood Dr.

City State Zip Code  
 Springfield OH 45503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Pentaflex, Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

03 / 11 / 2015

**Transaction ID : SA11AI.7853**

Amount of Each Receipt this Period

500.00

Itemized contribution

Full Name (Last, First, Middle Initial)

**B. Mr. Omar Nashashibi**

Mailing Address 40 R Street, NW

City State Zip Code  
 Washington DC 20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Franklin Partnership, LLP

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 09 / 2015

**Transaction ID : SA11AI.7806**

Amount of Each Receipt this Period

250.00

Itemized contribution

Full Name (Last, First, Middle Initial)

**C. Mr. Frederick Pfaff**

Mailing Address 12200 Brookpark Rd.

City State Zip Code  
 Cleveland OH 44130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Anchor Manufacturing Group

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 09 / 2015

**Transaction ID : SA11AI.7818**

Amount of Each Receipt this Period

250.00

Itemized contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

Full Name (Last, First, Middle Initial)

A. Mr. Michael Smith

Mailing Address 89 Golfview Rd.

City

Lake Zurich

State

IL

Zip Code

60047-1274

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Termax Corporation

Occupation

Executive

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2015

Transaction ID : SA11AI.7857

Amount of Each Receipt this Period

2500.00

Itemized contribution

Full Name (Last, First, Middle Initial)

B. Mr. Patrick A. Thompson Sr.

Mailing Address 1899 South Shore Drive

City

Holland

State

MI

Zip Code

49423

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Trans-Matic Manufacturing Co.

Occupation

Executive

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2015

Transaction ID : SA11AI.7799

Amount of Each Receipt this Period

1000.00

Itemized contribution

Full Name (Last, First, Middle Initial)

C. Mr. Tom Thornburg

Mailing Address 5020 Somerset Lane

City

Columbus

State

IN

Zip Code

47201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sacoma International, Inc.

Occupation

Executive

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2015

Transaction ID : SA11AI.7823

Amount of Each Receipt this Period

100.00

Itemized contribution

SUBTOTAL of Receipts This Page (optional)..... ►

3600.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

Full Name (Last, First, Middle Initial)

**A. Mr. Mark Ullstrup**

Mailing Address 900 W. Drexel Ave.

City

Oak Creek

State

WI

Zip Code

53154

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Superior Die Set Corp.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2015

Transaction ID : SA11AI.7817

Amount of Each Receipt this Period

250.00

Itemized contribution

Full Name (Last, First, Middle Initial)

**B. Ms Gretchen Zierick**

Mailing Address 24 Sherwood Rd.

City

Upper Saddle River

State

NJ

Zip Code

07458-1634

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Zierick Manufacturing Corp.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2015

Transaction ID : SA11AI.7803

Amount of Each Receipt this Period

3000.00

Itemized contribution

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3250.00

10850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 13

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)**

Full Name (Last, First, Middle Initial)

## **A. Precision Metalforming Association**

Mailing Address 6363 Oak Tree Blvd.

City State Zip Code  
Independence OH 44131

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2015

**Transaction ID : SA15.7859**

Amount of Each Receipt this Period

259.15

Offsets to bank charges

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

259.15

259.15

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)**

Full Name (Last, First, Middle Initial)

**A. Heartland Payment Systems**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2015

Mailing Address One Heartland Way

**Transaction ID : SB21B.7863**

City	State	Zip Code
Jefferson	IN	47130

Amount of Each Disbursement this Period

Purpose of Disbursement  
Fee

001

Candidate Name

Category/  
Type

259.20
--------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. JPMorgan Chase Bank, N.A.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2015

Mailing Address 6200 Brecksville Rd.

**Transaction ID : SB21B.7860**

City	State	Zip Code
Independence	OH	44131

Amount of Each Disbursement this Period

Purpose of Disbursement  
Bank charges

001

Candidate Name

Category/  
Type

65.85
-------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. JPMorgan Chase Bank, N.A.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2015

Mailing Address 6200 Brecksville Rd.

**Transaction ID : SB21B.7862**

City	State	Zip Code
Independence	OH	44131

Amount of Each Disbursement this Period

Purpose of Disbursement  
Bank charges

001

Candidate Name

Category/  
Type

35.00
-------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional)..... ►

360.05
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**TOTAL** This Period (last page this line number only)..... ►

360.05
--------

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

### A. DAN COATS FOR INDIANA

Date of Disbursement

Transaction ID : SB23.7865

010

Amount of Each Disbursement this Period

DANIEL R COATS

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input checked="" type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State: IN	District: 00	

Disbursement For: 2016

☐ Primary ☒ General

☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

#### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional).....

-1000.00

**TOTAL** This Period (last page this line number only).....

-1000.00